

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Additional CPT® Codes
Effective: January 1, 2011

CPT® CODE	DOLLAR VALUE			MODIFIERS												
	NON- FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	PRIOR AUTH
11045	\$54.09	\$31.00	0	0%	0%	0%	0	0	0	0	0	0		R		
11046	\$94.82	\$66.25	0	0%	0%	0%	0	0	0	0	0	0		R		
11047	\$154.99	\$114.87	0	0%	0%	0%	0	0	0	0	0	0		R		
22551	\$2,973.36	\$2,973.36	90	10%	69%	21%	0	2	0	2	2	0		R		Y-UR
22552	\$691.68	\$691.68	0	0%	0%	0%	0	0	0	2	2	0		R		Y-UR
29914	\$1,793.01	\$1,793.01	90	10%	69%	21%	0	3	1	2	1	0	29860	R		Y-UR
29915	\$1,827.05	\$1,827.05	90	10%	69%	21%	0	3	1	2	1	0	29860	R		Y-UR
29916	\$1,827.05	\$1,827.05	90	10%	69%	21%	0	3	1	2	1	0	29860	R		Y-UR
31295	\$3,671.11	\$308.15	0	0%	0%	0%	0	2	1	2	0	0		R		
31296	\$6,869.96	\$367.72	0	0%	0%	0%	0	2	1	2	0	0		R		
31297	\$6,806.75	\$301.47	0	0%	0%	0%	0	2	1	0	0	0		R		
31634	\$3,253.55	\$363.46	0	0%	0%	0%	0	3	0	2	0	0	31622	R		
33620	\$2,954.52	\$2,954.52	90	9%	84%	7%	0	2	0	2	1	0		R		Y
33621	\$1,591.22	\$1,591.22	90	9%	84%	7%	0	2	0	2	1	0		R		Y
33622	Not Covered	Not Covered	90	9%	84%	7%	0	2	0	2	1	0		X		
37220	\$5,697.52	\$748.81	0	0%	0%	0%	0	2	1	1	0	0		R		Y
37221	\$8,430.79	\$914.13	0	0%	0%	0%	0	2	1	0	0	0		R		Y
37222	\$1,636.20	\$339.76	0	0%	0%	0%	0	0	1	0	0	0		R		Y
37223	\$8,395.54	\$385.95	0	0%	0%	0%	0	0	1	0	0	0		R		Y
37224	\$6,849.30	\$825.39	0	0%	0%	0%	0	2	1	0	0	0		R		Y
37225	\$19,397.94	\$1,110.45	0	0%	0%	0%	0	2	1	0	0	0		R		Y
37226	\$16,252.57	\$929.33	0	0%	0%	0%	0	2	1	0	0	0		R		Y
37227	\$26,233.86	\$1,340.81	0	0%	0%	0%	0	2	1	0	0	0		R		Y
37228	\$9,756.41	\$1,007.73	0	0%	0%	0%	0	2	1	0	0	0		R		Y
37229	\$19,222.28	\$1,300.08	0	0%	0%	0%	0	2	1	0	0	0		R		Y
37230	\$15,094.71	\$1,259.36	0	0%	0%	0%	0	2	1	0	0	0		R		Y
37231	\$24,252.44	\$1,368.16	0	0%	0%	0%	0	2	1	0	0	0		R		Y
37232	\$2,183.83	\$363.46	0	0%	0%	0%	0	0	1	0	0	0		R		Y
37233	\$2,661.56	\$598.68	0	0%	0%	0%	0	0	1	0	0	0		R		Y
37234	\$6,990.31	\$500.22	0	0%	0%	0%	0	0	1	0	0	0		R		Y
37235	\$7,459.53	\$709.30	0	0%	0%	0%	0	0	1	0	0	0		R		Y
38900	Not Covered	Not Covered	0	0%	0%	0%	0	0	1	2	1	0		X		
43283	\$282.63	\$282.63	0	0%	0%	0%	0	0	0	2	1	0		R		Y
43327	\$1,427.11	\$1,427.11	90	9%	81%	10%	0	2	0	2	1	0		R		
43328	\$2,079.89	\$2,079.89	90	9%	81%	10%	0	2	0	2	1	0		R		Y
43332	\$2,040.99	\$2,040.99	90	9%	81%	10%	0	2	0	2	1	0		R		Y
43333	\$2,215.43	\$2,215.43	90	9%	81%	10%	0	2	0	2	1	0		R		Y
43334	\$2,237.31	\$2,237.31	90	9%	81%	10%	0	2	0	2	1	0		R		Y

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	NON- FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	PRIOR AUTH
43335	\$2,409.93	\$2,409.93	90	9%	81%	10%	0	2	0	2	1	0		R		Y
43336	\$2,636.03	\$2,636.03	90	9%	81%	10%	0	2	0	2	1	0		R		Y
43337	\$2,879.76	\$2,879.76	90	9%	81%	10%	0	2	0	2	1	0		R		Y
43338	\$234.61	\$234.61	0	0%	0%	0%	0	0	0	2	1	0		R		Y
43753	\$36.47	\$36.47	0	0%	0%	0%	0	0	0	2	0	0		R		
43754	\$141.62	\$55.92	0	0%	0%	0%	0	0	0	2	0	0		R		
43755	\$215.16	\$102.11	0	0%	0%	0%	0	0	0	2	0	0		R		
43756	\$392.64	\$92.39	0	0%	0%	0%	0	0	0	2	0	0		R		
43757	\$505.08	\$133.11	0	0%	0%	0%	0	0	0	2	0	0		R		
49327	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	2	1	0		X		
53860	Not Covered	Not Covered	90	8%	83%	9%	0	2	0	0	0	0		X		
57156	Not Covered	Not Covered	0	0%	0%	0%	0	2	0	0	0	0		X		
61781	\$410.87	\$410.87	0	0%	0%	0%	0	0	0	0	0	0		R		
61782	\$339.76	\$339.76	0	0%	0%	0%	0	0	0	0	0	0		R		
61783	\$364.07	\$364.07	0	0%	0%	0%	0	0	0	0	0	0		R		
64566	\$232.18	\$52.27	0	0%	0%	0%	0	2	0	0	0	0		R		Y
64568	\$1,128.08	\$1,128.08	90	11%	76%	13%	0	2	1	0	0	0		R		Y
64569	\$1,073.98	\$1,073.98	90	11%	76%	13%	0	2	1	0	1	1		R		Y
64570	\$937.23	\$937.23	90	11%	76%	13%	0	2	1	0	1	1		R		Y
64611	\$175.05	\$157.42	10	10%	80%	10%	0	2	2	0	0	0		R		Y
65778	\$2,265.27	\$131.28	10	10%	80%	10%	0	2	1	0	0	0		R		
65779	\$2,038.56	\$511.16	10	10%	80%	10%	0	2	1	0	0	0		R		
66174	\$1,720.07	\$1,720.07	90	10%	70%	20%	0	2	1	2	1	0		R		Y
66175	\$1,907.88	\$1,907.88	90	10%	70%	20%	0	2	1	2	1	0		R		Y
74176	\$387.78	\$387.78	0	0%	0%	0%	1	4	0	0	0	0		R		
74176-26	\$149.52	\$149.52	0	0%	0%	0%	1	0	0	0	0	0		R		
74176-TC	\$238.26	\$238.26	0	0%	0%	0%	1	4	0	0	0	0		R		
74177	\$610.84	\$610.84	0	0%	0%	0%	1	4	0	0	0	0		R		
74177-26	\$156.81	\$156.81	0	0%	0%	0%	1	0	0	0	0	0		R		
74177-TC	\$454.63	\$454.63	0	0%	0%	0%	1	4	0	0	0	0		R		
74178	\$774.34	\$774.34	0	0%	0%	0%	1	4	0	0	0	0		R		
74178-26	\$173.22	\$173.22	0	0%	0%	0%	1	0	0	0	0	0		R		
74178-TC	\$601.11	\$601.11	0	0%	0%	0%	1	4	0	0	0	0		R		
76881	\$206.65	\$206.65	0	0%	0%	0%	1	0	0	9	0	0		R		
76881-26	\$51.06	\$51.06	0	0%	0%	0%	1	0	0	9	0	0		R		
76881-TC	\$155.60	\$155.60	0	0%	0%	0%	1	0	0	9	0	0		R		
76882	\$53.49	\$53.49	0	0%	0%	0%	1	0	0	9	0	0		R		
76882-26	\$35.25	\$35.25	0	0%	0%	0%	1	0	0	9	0	0		R		

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76882-TC	\$18.23	\$18.23	0	0%	0%	0%	1	0	0	9	0	0	R			
80104	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X			
82930	\$7.66	\$7.66	0	0%	0%	0%	9	9	9	9	9	9	L			
83861	\$33.01	\$33.01	0	0%	0%	0%	9	9	9	9	9	9	L			
84112	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X			
85598	\$35.42	\$35.42	0	0%	0%	0%	9	9	9	9	9	9	L			Y
86481	\$122.11	\$122.11	0	0%	0%	0%	9	9	9	9	9	9	L			
86902	\$6.87	\$6.87	0	0%	0%	0%	9	9	9	9	9	9	L			
87501	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X			
87502	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X			
87503	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9	X			
87906	\$253.60	\$253.60	0	0%	0%	0%	9	9	9	9	9	9	L			
88120	\$822.35	\$822.35	0	0%	0%	0%	1	0	0	0	0	0	R			Y
88120-26	\$92.99	\$92.99	0	0%	0%	0%	1	0	0	0	0	0	R			Y
88120-TC	\$729.97	\$729.97	0	0%	0%	0%	1	0	0	0	0	0	R			Y
88121	\$694.72	\$694.72	0	0%	0%	0%	1	0	0	0	0	0	R			Y
88121-26	\$82.05	\$82.05	0	0%	0%	0%	1	0	0	0	0	0	R			Y
88121-TC	\$612.66	\$612.66	0	0%	0%	0%	1	0	0	0	0	0	R			Y
88177	\$49.23	\$49.23	0	0%	0%	0%	1	0	0	0	0	0	R			Y
88177-26	\$38.29	\$38.29	0	0%	0%	0%	1	0	0	0	0	0	R			Y
88177-TC	\$11.55	\$11.55	0	0%	0%	0%	1	0	0	0	0	0	R			Y
88363	\$67.47	\$29.78	0	0%	0%	0%	0	0	0	0	0	0	R			Y
88749	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9	N			Y
90460	\$41.33	\$41.33	0	0%	0%	0%	0	0	0	0	0	0	R			
90461	\$20.67	\$20.67	0	0%	0%	0%	0	0	0	0	0	0	R			
90654	\$10.76	\$10.76	0	0%	0%	0%	9	9	9	9	9	9	D			Y
90867	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X			
90868	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0	X			
91013	\$41.33	\$41.33	0	0%	0%	0%	1	0	0	0	0	0	R			Y
91013-26	\$17.63	\$17.63	0	0%	0%	0%	1	0	0	0	0	0	R			Y
91013-TC	\$23.70	\$23.70	0	0%	0%	0%	1	0	0	0	0	0	R			Y
91117	\$247.37	\$264.39	0	0%	0%	0%	0	0	0	0	0	0	R			
92132	\$64.43	\$64.43	0	0%	0%	0%	1	0	2	0	0	0	R			
92132-26	\$37.08	\$37.08	0	0%	0%	0%	1	0	2	0	0	0	R			
92132-TC	\$27.35	\$27.35	0	0%	0%	0%	1	0	2	0	0	0	R			
92133	\$79.01	\$79.01	0	0%	0%	0%	1	0	2	0	0	0	R			
92133-26	\$51.66	\$51.66	0	0%	0%	0%	1	0	2	0	0	0	R			
92133-TC	\$27.35	\$27.35	0	0%	0%	0%	1	0	2	0	0	0	R			

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92134	\$79.01	\$79.01	0	0%	0%	0%	1	0	2	0	0	0		R				
92134-26	\$51.66	\$51.66	0	0%	0%	0%	1	0	2	0	0	0		R				
92134-TC	\$27.35	\$27.35	0	0%	0%	0%	1	0	2	0	0	0		R				
92227	\$20.67	\$20.67	0	0%	0%	0%	9	0	2	0	0	0		R				
92228	\$53.49	\$53.49	0	0%	0%	0%	1	0	2	0	0	0		R				
92228-26	\$31.00	\$31.00	0	0%	0%	0%	1	0	2	0	0	0		R				
92228-TC	\$22.49	\$22.49	0	0%	0%	0%	1	0	2	0	0	0		R				
93451	\$1,366.33	\$1,366.33	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93451-26	\$254.67	\$254.67	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93451-TC	\$1,111.67	\$1,111.67	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93452	\$1,507.95	\$1,507.95	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93452-26	\$445.52	\$445.52	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93452-TC	\$1,062.43	\$1,062.43	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93453	\$1,973.53	\$1,973.53	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93453-26	\$584.70	\$584.70	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93453-TC	\$1,388.82	\$1,388.82	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93454	\$1,556.58	\$1,556.58	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93454-26	\$449.77	\$449.77	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93454-TC	\$1,106.80	\$1,106.80	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93455	\$1,816.11	\$1,816.11	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93455-26	\$518.45	\$518.45	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93455-TC	\$1,297.05	\$1,297.05	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93456	\$1,947.39	\$1,947.39	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93456-26	\$576.19	\$576.19	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93456-TC	\$1,371.20	\$1,371.20	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93457	\$2,206.92	\$2,206.92	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93457-26	\$644.88	\$644.88	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93457-TC	\$1,561.44	\$1,561.44	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93458	\$1,877.49	\$1,877.49	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93458-26	\$548.24	\$548.24	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93458-TC	\$1,329.26	\$1,329.26	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93459	\$2,073.21	\$2,073.21	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93459-26	\$617.52	\$617.52	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93459-TC	\$1,455.68	\$1,455.68	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93460	\$2,217.25	\$2,217.25	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93460-26	\$688.03	\$688.03	0	0%	0%	0%	1	2	0	0	0	0		R		Y		
93460-TC	\$1,529.22	\$1,529.22	0	0%	0%	0%	1	0	0	0	0	0		R		Y		
93461	\$2,541.82	\$2,541.82	0	0%	0%	0%	1	2	0	0	0	0		R		Y		

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93461-26	\$759.14	\$759.14	0	0%	0%	0%	1	2	0	0	0	0		R		Y
93461-TC	\$1,783.29	\$1,783.29	0	0%	0%	0%	1	0	0	0	0	0		R		Y
93462	\$350.09	\$350.09	0	0%	0%	0%	0	2	0	0	0	0		R		Y
93463	\$185.99	\$185.99	0	0%	0%	0%	0	2	0	0	0	0		R		Y
93464	\$447.34	\$447.34	0	0%	0%	0%	1	2	0	0	0	0		R		Y
93464-26	\$163.50	\$163.50	0	0%	0%	0%	1	2	0	0	0	0		R		Y
93464-TC	\$283.84	\$283.84	0	0%	0%	0%	1	0	0	0	0	0		R		Y
93563	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
93564	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
93565	\$75.98	\$75.98	0	0%	0%	0%	0	0	0	0	0	0		R		
93566	\$303.29	\$75.98	0	0%	0%	0%	0	0	0	0	0	0		R		
93567	\$250.41	\$85.09	0	0%	0%	0%	0	0	0	0	0	0		R		
93568	\$274.73	\$77.80	0	0%	0%	0%	0	0	0	0	0	0		R		
95800	\$2,361.30	\$2,361.30	0	0%	0%	0%	1	0	0	0	0	0		R		Y
95800-26	\$103.33	\$103.33	0	0%	0%	0%	1	0	0	0	0	0		R		Y
95800-TC	\$2,258.58	\$2,258.58	0	0%	0%	0%	1	0	0	0	0	0		R		Y
95801	\$3,999.32	\$3,999.32	0	0%	0%	0%	1	0	0	0	0	0		R		Y
95801-26	\$91.17	\$91.17	0	0%	0%	0%	1	0	0	0	0	0		R		Y
95801-TC	\$3,908.15	\$3,908.15	0	0%	0%	0%	1	0	0	0	0	0		R		Y
96446	\$318.49	\$37.08	0	0%	0%	0%	5	0	0	0	0	0		R		Y
99224	\$49.23	\$49.23	0	0%	0%	0%	0	0	0	0	0	0		R		
99225	\$86.92	\$86.92	0	0%	0%	0%	0	0	0	0	0	0		R		
99226	\$130.07	\$130.07	0	0%	0%	0%	0	0	0	0	0	0		R		
0058T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
0059T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
0234T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
0235T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
0236T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
0237T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
0238T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
0239T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
0240T	By Report	By Report	0	0%	0%	0%	1	0	0	0	0	0		N		Y
0240T-26	By Report	By Report	0	0%	0%	0%	1	0	0	0	0	0		N		Y
0240T-TC	By Report	By Report	0	0%	0%	0%	1	0	0	0	0	0		N		Y
0241T	By Report	By Report	0	0%	0%	0%	1	0	0	0	0	0		N		Y
0241T-26	By Report	By Report	0	0%	0%	0%	1	0	0	0	0	0		N		Y
0241T-TC	By Report	By Report	0	0%	0%	0%	1	0	0	0	0	0		N		Y
0242T	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Additional CPT® Codes
Effective: January 1, 2011

DOLLAR VALUE			MODIFIERS													
CPT® CODE	NON- FACILITY SETTING	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	PRIOR AUTH
0242T-26	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
0242T-TC	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
0243T	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
0243T-26	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
0243T-TC	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
0244T	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
0244T-26	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
0244T-TC	Not Covered	Not Covered	0	0%	0%	0%	1	0	0	0	0	0		X		
0245T	By Report	By Report	0	0%	0%	0%	0	0	1	0	0	0		N		Y-UR
0246T	By Report	By Report	0	0%	0%	0%	0	0	1	0	0	0		N		Y-UR
0247T	By Report	By Report	0	0%	0%	0%	0	0	1	0	0	0		N		Y-UR
0248T	By Report	By Report	0	0%	0%	0%	0	0	1	0	0	0		N		Y-UR
0249T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		Y
0250T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
0251T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
0252T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		
0253T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
0254T	By Report	By Report	0	0%	0%	0%	0	0	0	0	0	0		N		Y-UR
0255T	By Report	By Report	0	0%	0%	0%	1	0	0	0	0	0		N		Y-UR
0255T-26	By Report	By Report	0	0%	0%	0%	1	0	0	0	0	0		N		Y-UR
0255T-TC	By Report	By Report	0	0%	0%	0%	1	0	0	0	0	0		N		Y-UR
0256T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
0257T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
0258T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
0259T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
0260T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
0261T	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Additional HCPCS Codes
Effective: January 1, 2011

		DOLLAR VALUE				MODIFIERS											
HCPCS CODE	ABBREVIATED DESCRIPTION	NON-FACILITY	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	PRIOR AUTH
A4566	Should sling/vest/abrestrain	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A7020	Interface, cough stim device	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
A9273	Hot/cold h2obot/cap/col/wrap	Bundled	Bundled	0	0%	0%	0%	9	9	9	9	9	9		B		
C9274	Crotalidae Poly Immune Fab	\$2,195.10	\$2,195.10	0	0%	0%	0%	9	9	9	9	9	9		D		Y
C9275	Hexaminolevulinate HCl	\$648.00	\$648.00	0	0%	0%	0%	9	9	9	9	9	9		D		Y
C9276	Cabazitaxel injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
C9277	Lumizyme, 1 mg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
C9278	Incobotulinumtoxin A	\$5.67	\$5.67	0	0%	0%	0%	9	9	9	9	9	9		D		Y
C9279	Injection, ibuprofen	\$1.42	\$1.42	0	0%	0%	0%	9	9	9	9	9	9		D		Y
D1352	Prev resin restoration, caries risk	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		Y
D3354	Pulpal regeneration, necr pulp	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		Y
D5992	Adj maxillofacial prosth app	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		Y
D5993	Maint & clean maxillo prosth	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		Y
D6254	Interim pontic	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		Y
D6795	Interim retainer crown	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		Y
D7251	Coronectomy, intnt prtl tth rmvl	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		Y
D7295	Bone hrvst, auto graft proc	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		Y
E0446-NU	Topical Ox Deliver sys, nos	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
E0446-RR	Topical Ox Deliver sys, nos	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
E1831-RR	Static str toe dev ext/flex	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
E2622-NU	Adj skin pro w/c cus wd<22in	\$299.68	\$299.68	0	0%	0%	0%	9	9	9	9	9	9		F		
E2623-NU	Adj skin pro wc cus wd>=22in	\$381.33	\$381.33	0	0%	0%	0%	9	9	9	9	9	9		F		
E2624-NU	Adj skin pro/pos cus<22in	\$302.14	\$302.14	0	0%	0%	0%	9	9	9	9	9	9		F		
E2625-NU	Adj skin pro/pos wc cus>=22	\$382.49	\$382.49	0	0%	0%	0%	9	9	9	9	9	9		F		
G0157	HHC PT assistant ea 15	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G0158	HHC OT assistant ea 15	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G0159	HHC PT maint ea 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G0160	HHC Occup Therapy ea 15	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G0161	HHC SLP ea 15 min	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G0162	HHC RN E&M plan svs, 15 min	\$38.69	\$38.69	0	0%	0%	0%	9	9	9	9	9	9		F		Y
G0163	HHC LPN/RN obs/asses ea 15	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G0164	HHC lis nurse train ea 15	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G0434	Drug screen multi drug class	\$28.66	\$28.66	0	0%	0%	0%	9	9	9	9	9	9		L		
G0436	Tobacco-use counsel 3-10 min	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
G0437	Tobacco-use counsel>10min	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
G0438	PPPS, initial visit	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
G0439	PPPS, subseq visit	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
G0440	Skin/dermal subs init 25or<	Not Covered	Not Covered	0	0%	0%	0%	0	2	0	0	0	0		X		
G0441	Skin/dermal subs each additi	Not Covered	Not Covered	0	0%	0%	0%	0	0	0	0	0	0		X		
G8629	Doc antibio order b/4 surg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8630	Doc antibio given b/4 surg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8631	Pt no elg 4 order antbi give	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8632	Doc no antibi order b/4 surg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Additional HCPCS Codes
Effective: January 1, 2011

		DOLLAR VALUE				MODIFIERS											
HCP CODE	ABBREVIATED DESCRIPTION	NON- FACILITY	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	PRIOR AUTH
G8633	Pharm ther osteo rx	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8634	Pt no elg phar ther osteo	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8635	No pharm ther osteo rx	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8636	Flu immun admin/prev rec	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8637	Pt no elg receiv flu immun	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8638	Flu immun no admin/prev rec	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8639	Flu immun admin or prev rec	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8640	Pt no elg rec flu immun	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8641	Flu immun not admin/pre rec	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8642	Hrdshp rural w/o internet	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8643	Hrdshp w/o suff pharm w/eRx	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8644	EP no prescribe priv	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8645	Asthma measures grp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8646	Asthma MG qual act perform	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8647	Fun stat score knee >= 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8648	Fun stat score knee < 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8649	Fun stat score knee pt noelg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8650	Fun stat score knee not done	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8651	Fun stat score hip >= 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8652	Fun stat score hip < 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8653	Fun stat score hip pt no elg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8654	Fun stat score hip not done	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8655	Fun stat score LE >= 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8656	Fun stat score LE < 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8657	Fun stat score LE pt no elg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8658	Fun stat score LE not done	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8659	Fun stat score LS >= 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8660	Fun stat score LS < 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8661	Fun stat score LS pt no elg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8662	Fun stat score LS not done	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8663	Fun stat score shdl >=0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8664	Fun stat score shdl < 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8665	Fun stat score shdl pt no el	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8666	Fun stat score shdl not done	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8667	Fun stat score UE >=0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8668	Fun stat score UE < 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8669	Fun stat score UE pt no elg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8670	Fun stat score UE not done	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8671	Fun stat score neck/TS >=0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8672	Fun stat score neck/TS < 0	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8673	Fun stat scor nek/TS pt no e	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8674	Fun stat scor nek/TS not don	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8675	BP Svst >= 140 mmHg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Additional HCPCS Codes
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		DOLLAR VALUE				MODIFIERS											
HCPCS CODE	ABBREVIATED DESCRIPTION	NON-FACILITY	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	PRIOR AUTH
G8676	BP Diast >= 90 mmHg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8677	BP Syst < 130 mmHg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8678	BP Syst >=130 - 139 mmHg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8679	BP Diast < 80 mmHg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8680	BP Diast 80-89 mmHg	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8681	Pt hosp w/HF	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8682	LVG test perf	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8683	Pt not elig for LVF test	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8684	Pt not hosp w/HF	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8685	LVF test not perf	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8686	Toba smkr curr or 2 hand exp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8687	No tob smkr cur no 2 hnd exp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8688	Smkls tob cur; no 2 hnd exp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8689	Toba use not assess	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8690	Curr toba smkr or 2 hand exp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8691	No cur tob smkr no 2 hnd exp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8692	Curr smkls tob; no 2 hnd exp	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
G8693	Tobacco no assess	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J0171	Adrenalin epinephrine inject	\$0.54	\$0.54	0	0%	0%	0%	9	9	9	9	9	9		D		
J0558	PenG benzathine/procaine inj	\$3.44	\$3.44	0	0%	0%	0%	9	9	9	9	9	9		D		
J0561	Penicillin g benzathine inj	\$3.99	\$3.99	0	0%	0%	0%	9	9	9	9	9	9		D		
J0597	C-1 esterase, berinert	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J0638	Canakinumab injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J0775	Collagenase, clost hist inj	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J1290	Ecaltantide injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J1559	Hizentra injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J1599	Ivig non-lyophilized, NOS	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N		
J1786	Imuglucerase injection	\$42.82	\$42.82	0	0%	0%	0%	9	9	9	9	9	9		D		
J1826	Interferon Beta-1A inj	\$735.48	\$735.48	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J2358	Olanzapine long-acting inj	\$3.21	\$3.21	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J2426	Paliperidone palmitate inj	\$6.84	\$6.84	0	0%	0%	0%	9	9	9	9	9	9		D		
J3095	Televancin injection	\$2.23	\$2.23	0	0%	0%	0%	9	9	9	9	9	9		D		
J3262	Tocilizumab injection	\$3.59	\$3.59	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J3357	Ustekinumab injection	\$117.40	\$117.40	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J3385	Velaglucerase alfa	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J7184	Wilate injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X		
J7196	Antithrombin recombinant	\$105.30	\$105.30	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J7309	Methyl aminolevulinate, top	\$73.98	\$73.98	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J7312	Dexamethasone intra implant	\$199.80	\$199.80	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J7335	Capsaicin 8% patch	\$26.04	\$26.04	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J7686	Treprostinil, non-comp unit	\$431.36	\$431.36	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J8562	Oral fludarabine phosphate	\$83.31	\$83.31	0	0%	0%	0%	9	9	9	9	9	9		D		Y
J9302	Ofatumumab injection	\$47.52	\$47.52	0	0%	0%	0%	9	9	9	9	9	9		D		Y

Washington State Department of Labor & Industries
Professional Services Fee Schedule

Additional HCPCS Codes
Effective: January 1, 2011

		DOLLAR VALUE				MODIFIERS												
HCPCS CODE	ABBREVIATED DESCRIPTION	NON- FACILITY	FACILITY SETTING	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI	LIC REQ	PRIOR AUTH	
J9307	Pralatrexate injection	\$168.75	\$168.75	0	0%	0%	0%	9	9	9	9	9	9		D		Y	
J9315	Romidepsin injection	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
J9351	Topotecan injection	\$30.34	\$30.34	0	0%	0%	0%	9	9	9	9	9	9		D		Y	
L3674	SO airplane w/wo joint CF	\$1,139.72	\$1,139.72	0	0%	0%	0%	9	9	9	9	9	9		F	Y		
L4631	Afo, walk boot type, cus fab	\$1,620.72	\$1,620.72	0	0%	0%	0%	9	9	9	9	9	9		F	Y		
L5961	Endo poly hip, pneu/hyd/rot	By Report	By Report	0	0%	0%	0%	9	9	9	9	9	9		N	Y		
L8693	Aud osseo dev, abutment	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q0478	Power adapter, combo vad	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q0479	Power module combo vad, rep	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q2035	Afluria vacc, 3 yrs & >, im	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q2036	Flulaval vacc, 3 yrs & >, im	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q2037	Fluvirin vacc, 3 yrs & >, im	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q2038	Fluzone vacc, 3 yrs & >, im	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q2039	NOS flu vacc, 3 yrs & >, im	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q4117	Hyalomatrix	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q4118	Matristem micromatrix	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q4119	Matristem wound matrix	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q4120	Matristem burn matrix	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
Q4121	Theraskin	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			
T1505	Elec med comp dev, noc	Not Covered	Not Covered	0	0%	0%	0%	9	9	9	9	9	9		X			